

Introduction

The 500 Cities Project—Local Data for Better Health—is a collaboration among the Robert Wood Johnson Foundation, the CDC Foundation, and the Centers for Disease Control and Prevention (CDC), whose purpose is to provide high quality small area estimates for behavioral risk factors that influence health status, for health outcomes, and the use of clinical preventive services. These estimates can be used to identify emerging health problems and to develop and implement of effective, targeted public health prevention activities.

Data Sources

Data was obtained from the CDC Behavioral Risk Factor Surveillance System (BRFSS) 2013, 2014, the Census Bureau 2010 census population data, American Community Survey 2009-2013 and 2010-2014 estimates, and Esri ArcGIS Online basemaps.

Methodology

CDC used small area estimation (SAE) methodology called multilevel regression and poststratification (MRP) that links geocoded health surveys and high spatial resolution population demographic and socioeconomic data to produce local level health related estimates. This approach also accounts for the associations between individual health outcomes, individual characteristics, and spatial contexts and factors at multiple levels (e.g., state, county), the approach also predicts individual disease risk and health behaviors in a multilevel modeling framework and estimates the geographic distributions of population disease burden and health behaviors at city and census tract level.

Further information on the small area estimation methodology can be obtained from

- [Multilevel Regression and Poststratification for Small-Area Estimation of Population Health Outcomes: A Case Study of Chronic Obstructive Pulmonary Disease Prevalence Using the Behavioral Risk Factor Surveillance System \[PDF-5.53MB\]](#)
- [Validation of Multilevel Regression and Poststratification Methodology for Small Area Estimation of Health Indicators from the Behavioral Risk Factor Surveillance System](#)

Limitations

All data presented in this map book are model-based estimates that reflect the statistically expected prevalence of each measure. These small area estimates tend to have narrow confidence ranges and may underestimate some areas with high prevalence or overestimate some areas with low prevalence. Because the small area model cannot detect effects because of local interventions, users are cautioned against using these estimates for program or policy evaluations.

Project Website

For more information please refer to <http://www.cdc.gov/500cities/>.

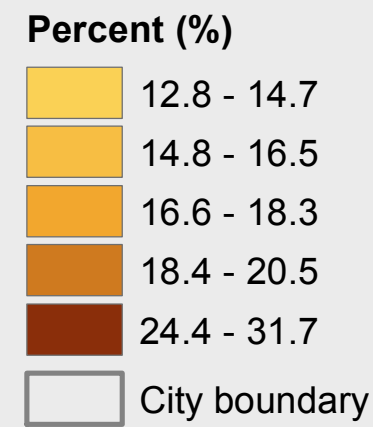
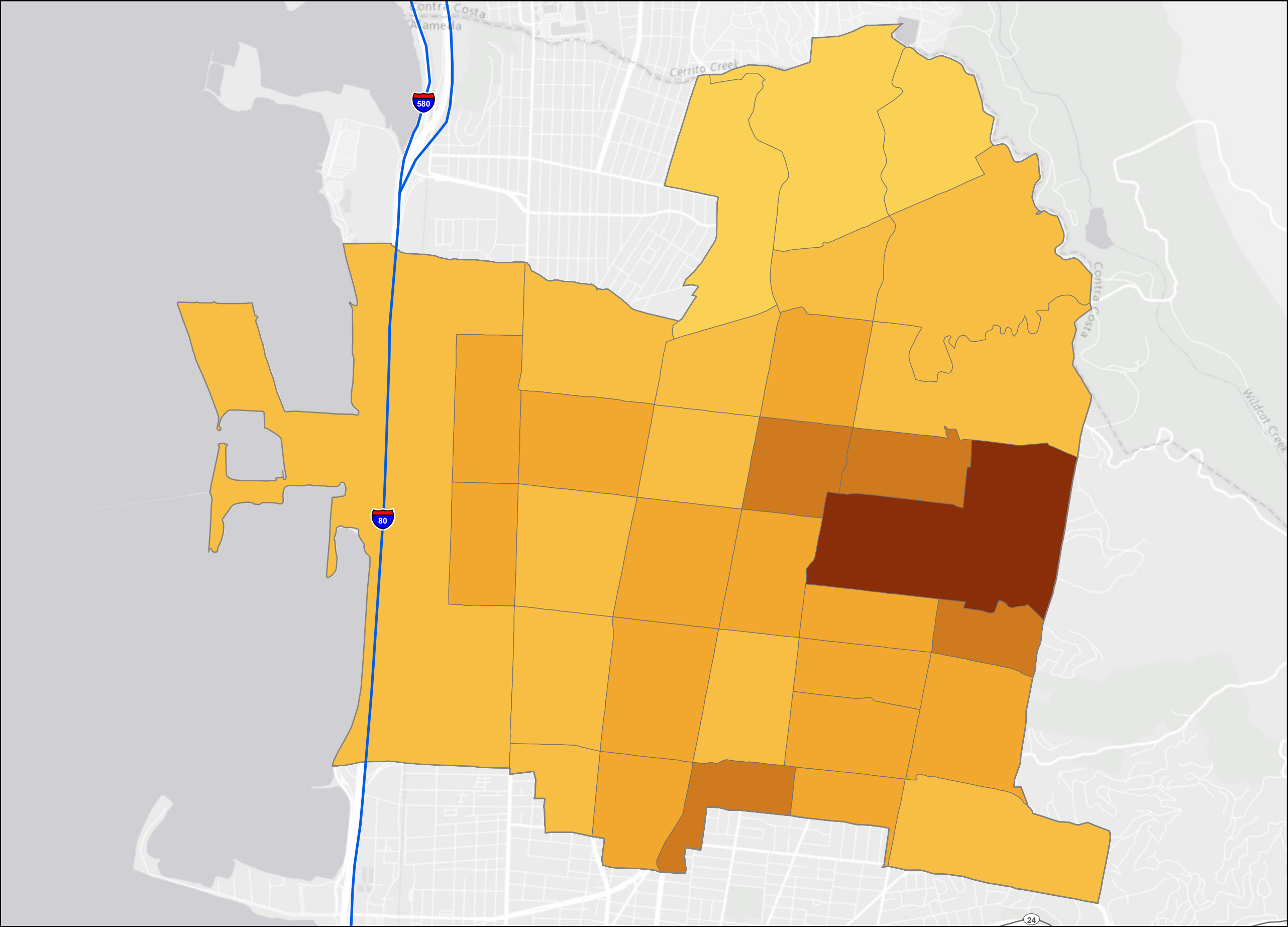
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Measure	Crude			Age-Adjusted			State Age-Adjusted	US Age-Adjusted
	Prevalence	Low 95% CI	High 95% CI	Prevalence	Low 95% CI	High 95% CI	Prevalence	Prevalence
Berkeley	CA							
Binge drinking prevalence among adults aged >=18 years	16.9	16.7	17.0	15.8	15.7	15.9	15.6	16.8
Current smoking among adults aged >=18 years	11.4	11.0	11.9	11.3	11.0	11.7	12.8	17.7
No leisure-time physical activity among adults aged >=18 years	16.1	15.6	16.5	16.5	16.2	16.9	21.5	23.3
Obesity among adults aged >=18 years	18.8	18.6	18.9	21.0	20.8	21.2	24.8	28.7
Arthritis among adults aged >=18 years	16.0	15.9	16.2	19.1	18.9	19.2	19.9	23.5
Sleeping less than 7 hours among adults aged >=18 years	30.5	30.2	30.9	30.9	30.6	31.1	33.8	35.1
Current asthma prevalence among adults aged >=18 years	8.4	8.3	8.5	8.2	8.2	8.3	7.7	8.8
High blood pressure among adults aged >=18 years	22.1	21.9	22.3	25.9	25.7	26.1	28.4	30.2
High cholesterol among adults aged >=18 years who have been screened in the past 5 years	32.9	32.6	33.2	31.4	31.2	31.5	34.3	33.2
Cancer among adults aged >=18 years	5.1	5.0	5.1	6.1	6.1	6.2	5.8	

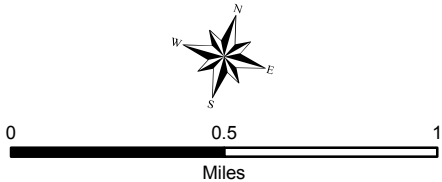
Unhealthy Behaviors

Binge drinking prevalence among adults aged ≥18 years by census tract, Berkeley, CA, 2014

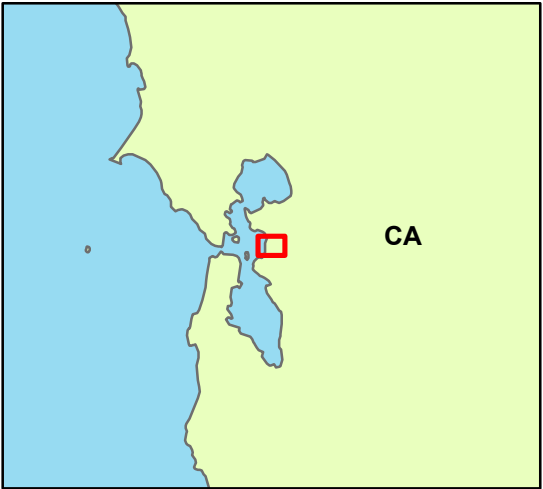


Classification:
Jenks natural breaks (9 classes) based on data for all 500 cities' census tracts. Legend depicts only those data classes within this map extent.

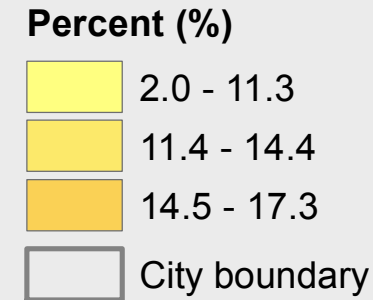
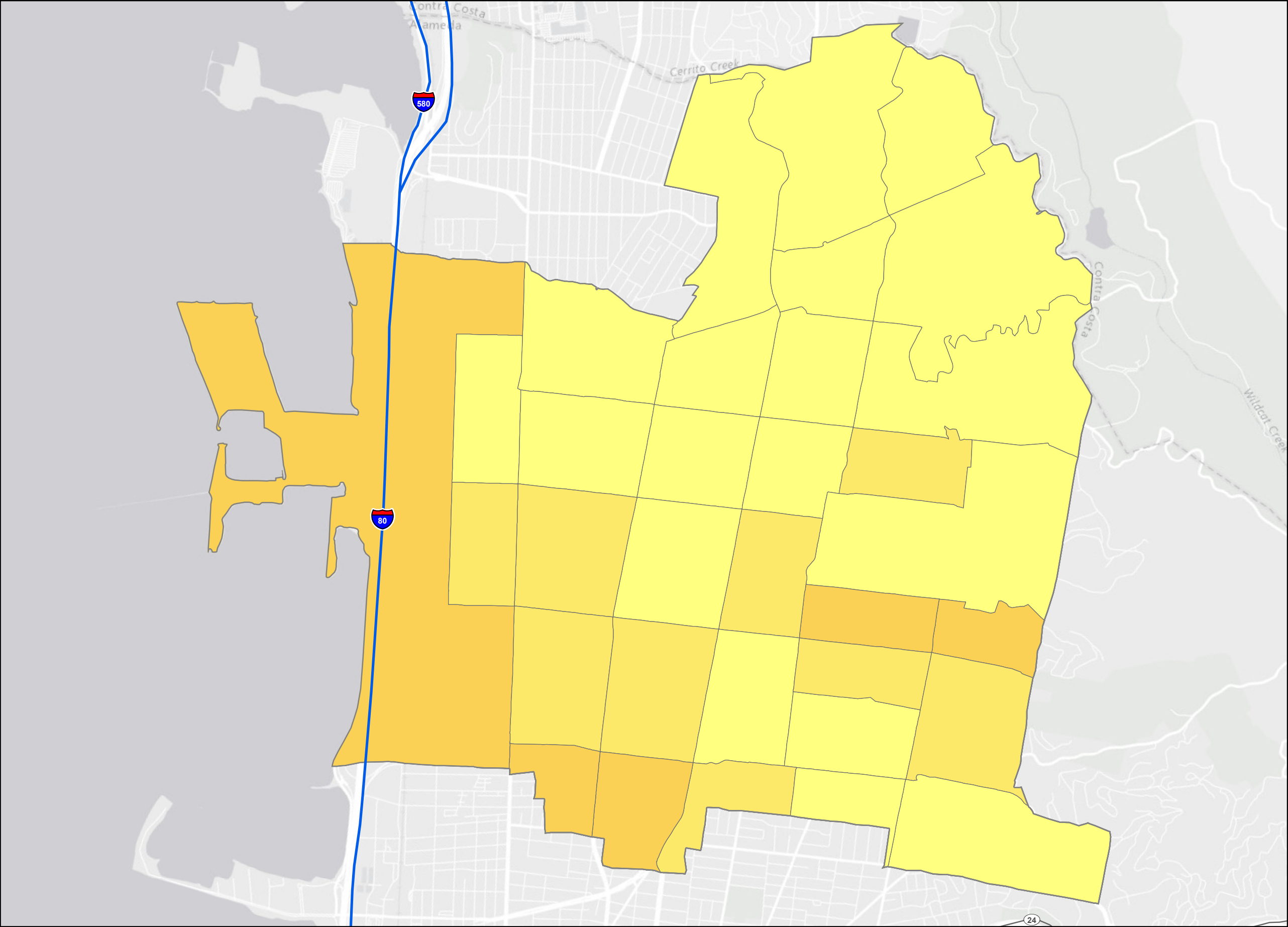
Census tracts with population less than 50 were excluded from the map.



Data sources:
CDC BRFSS 2014, US Census Bureau 2010 Census, ACS 2010-2014,

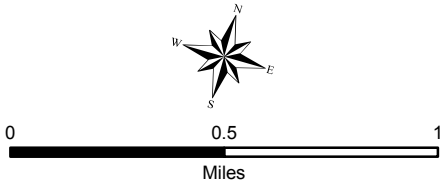


Current smoking among adults aged ≥18 years by census tract, Berkeley, CA, 2014

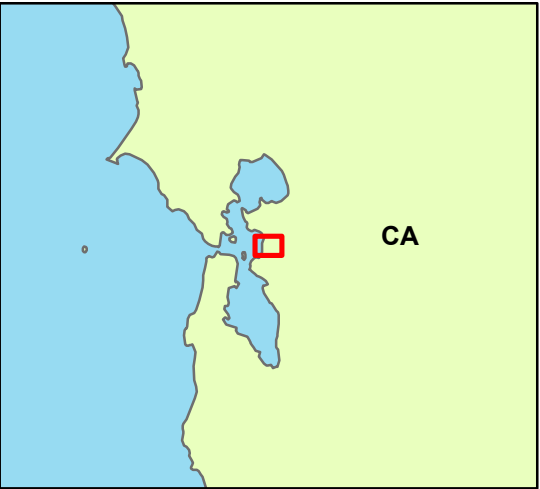


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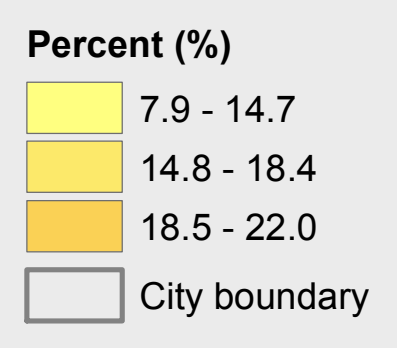
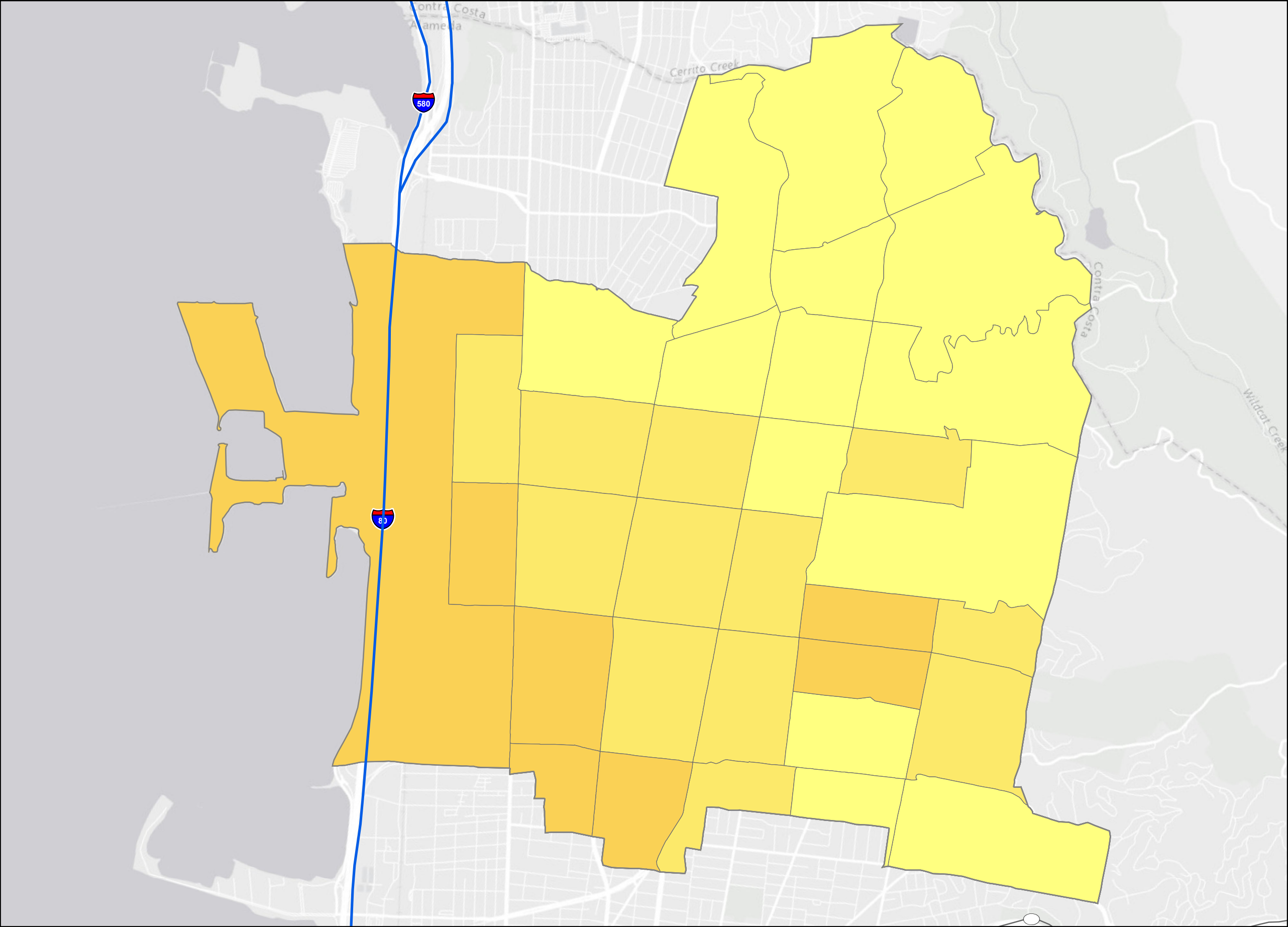
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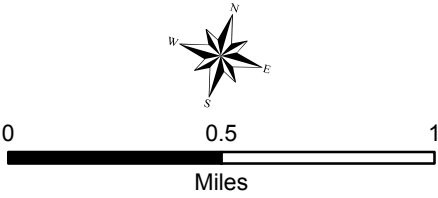


No leisure-time physical activity among adults aged ≥18 years by census tract, Berkeley, CA, 2014

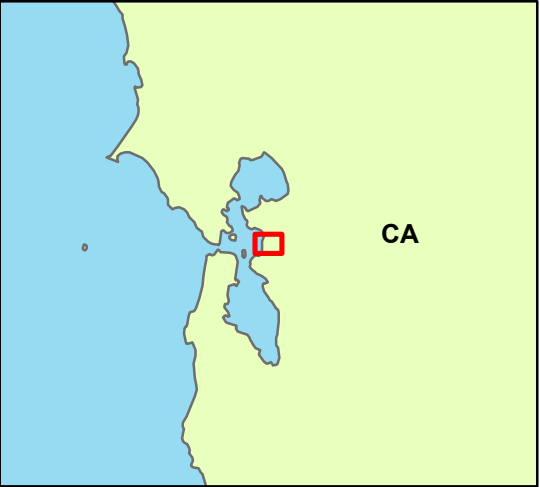


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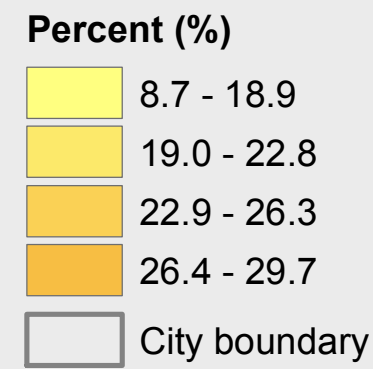
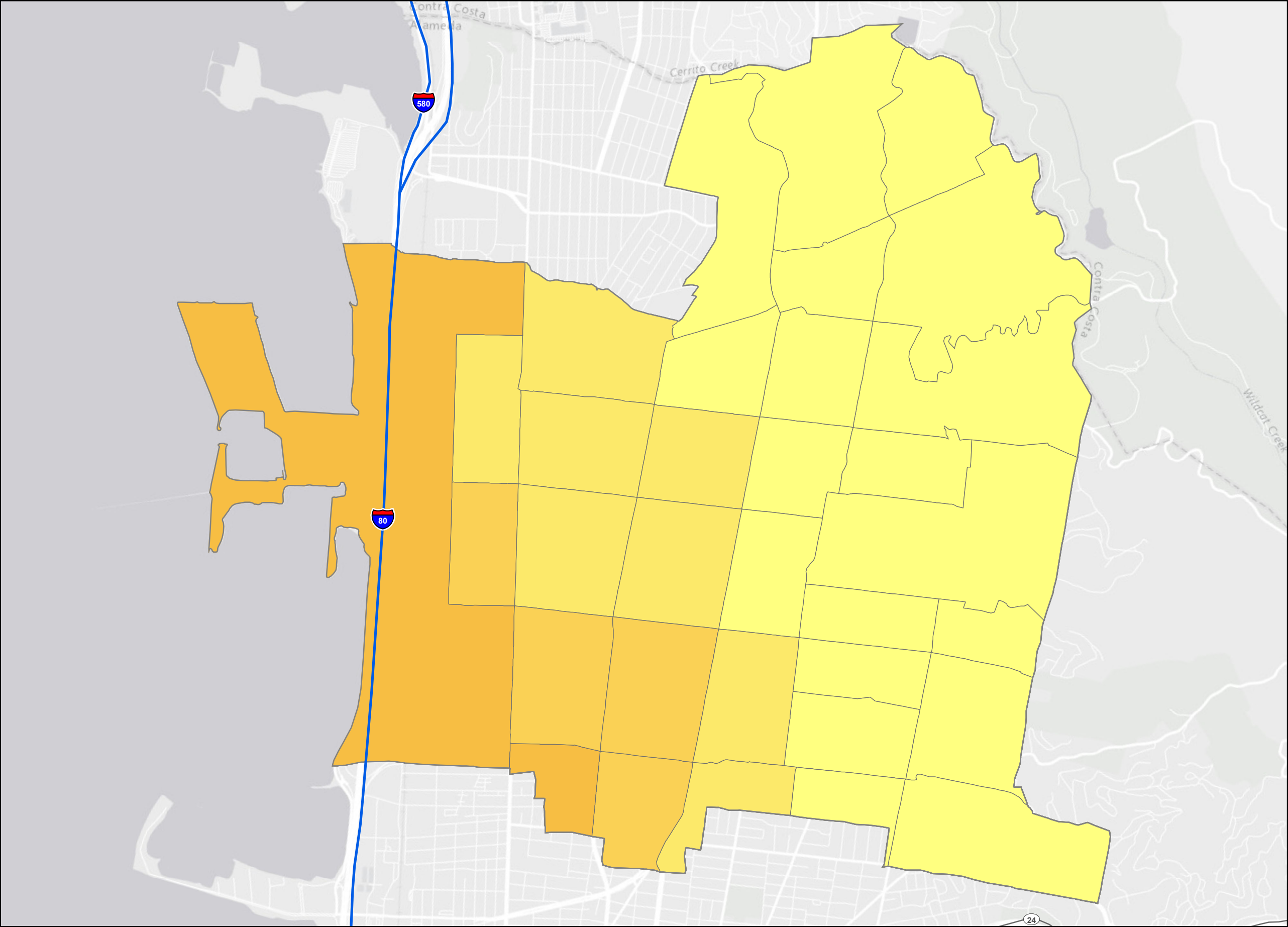
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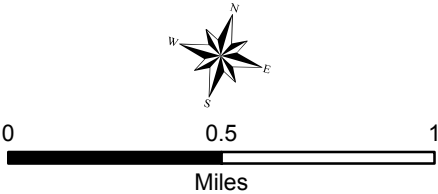


Obesity among adults aged ≥18 years by census tract, Berkeley, CA, 2014

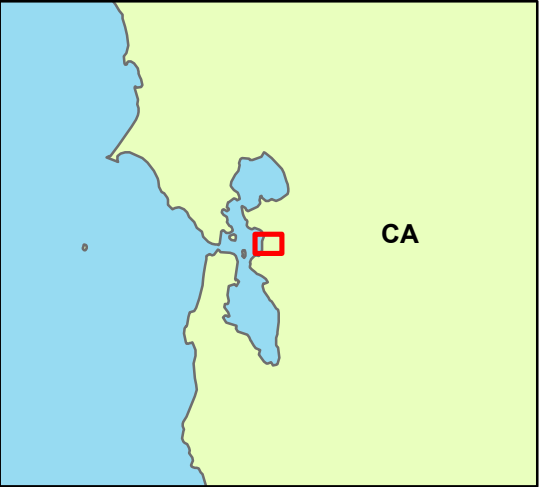


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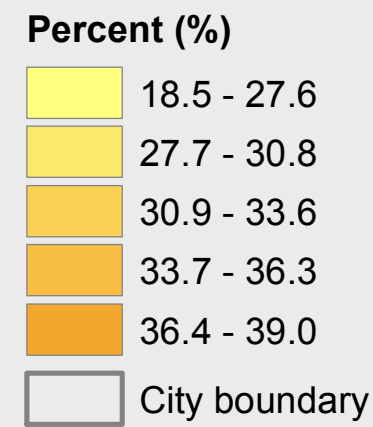
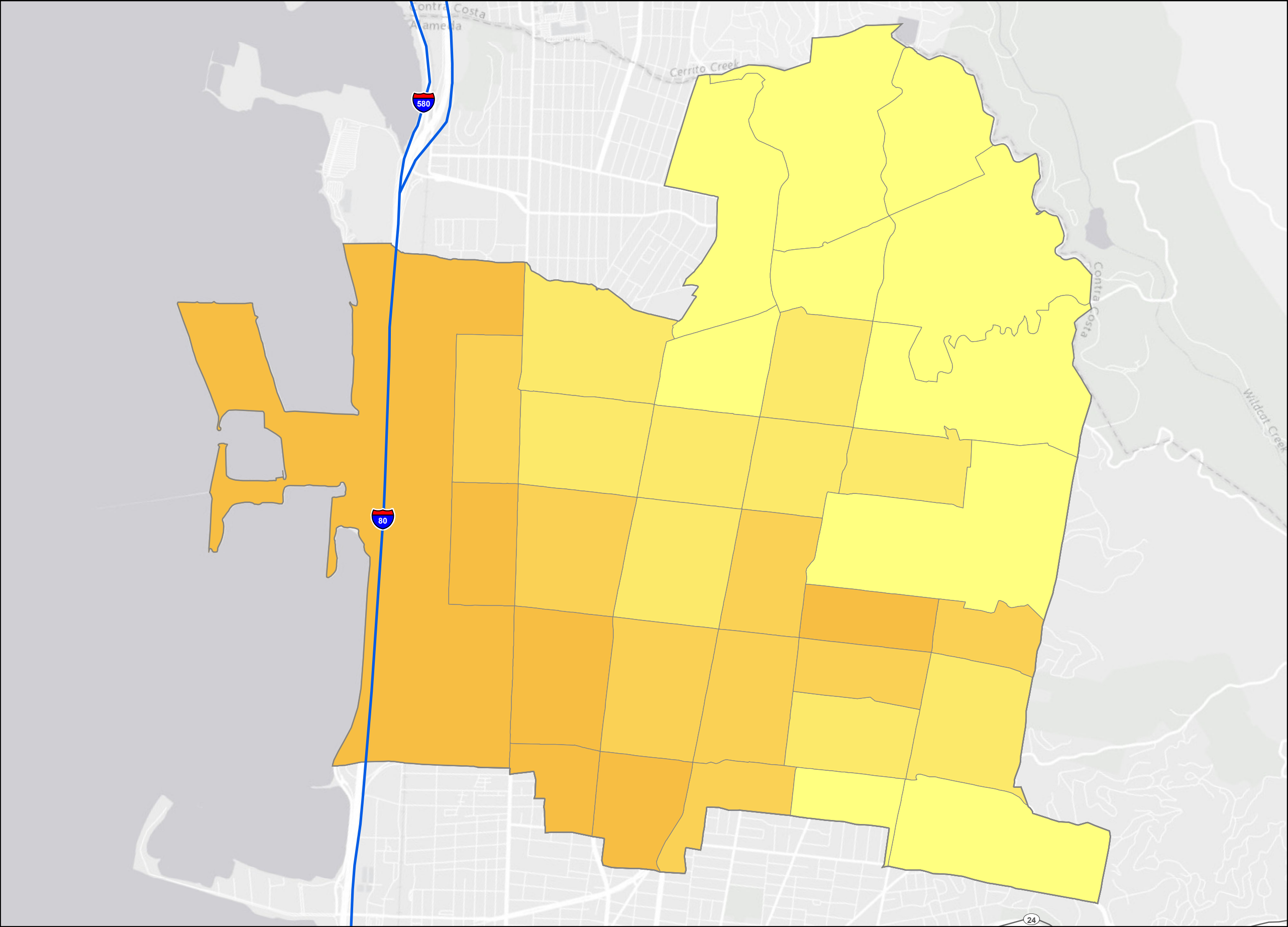
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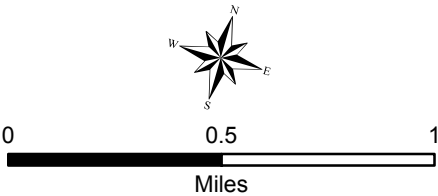


Sleeping less than 7 hours among adults aged ≥18 years by census tract, Berkeley, CA, 2014

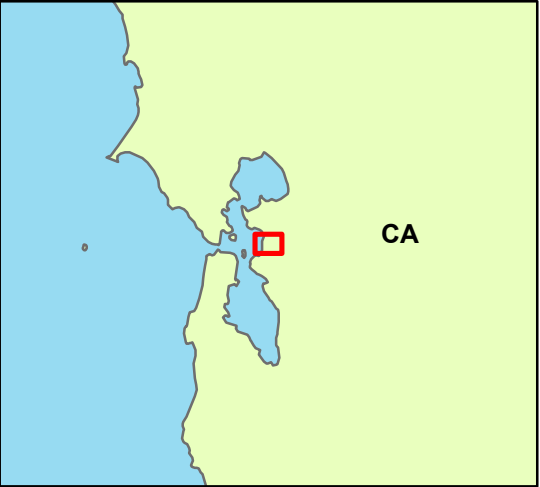


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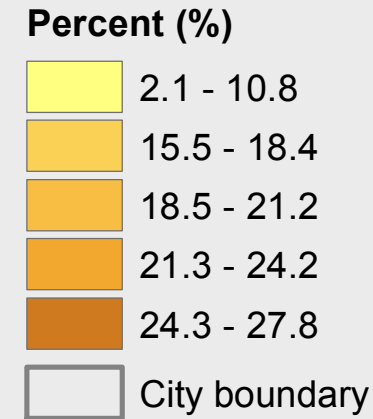
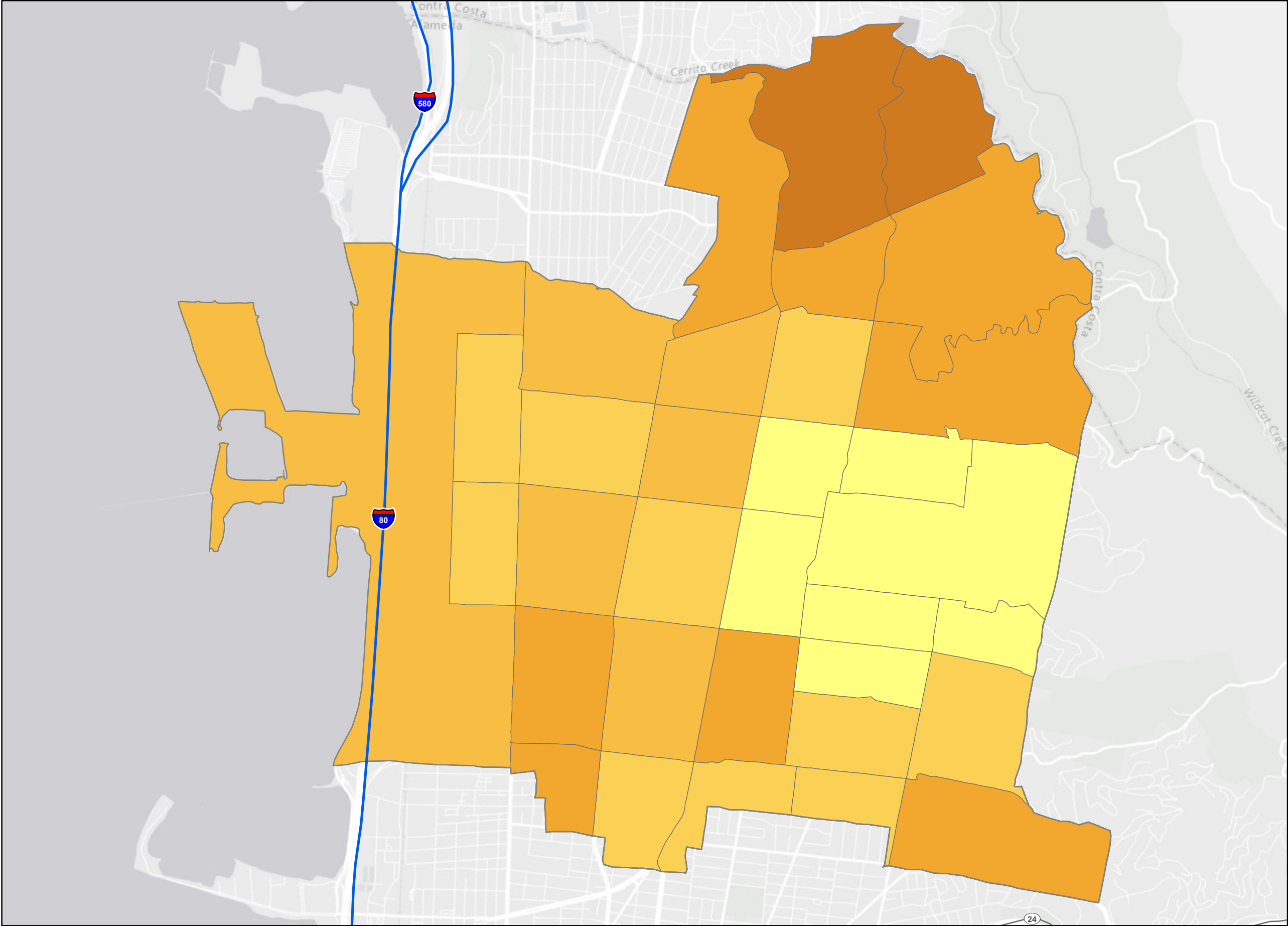


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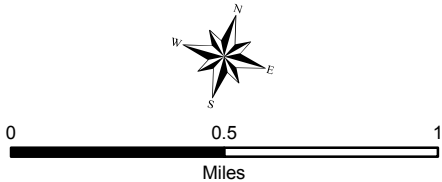
Health Outcomes

Arthritis among adults aged ≥18 years by census tract, Berkeley, CA, 2014

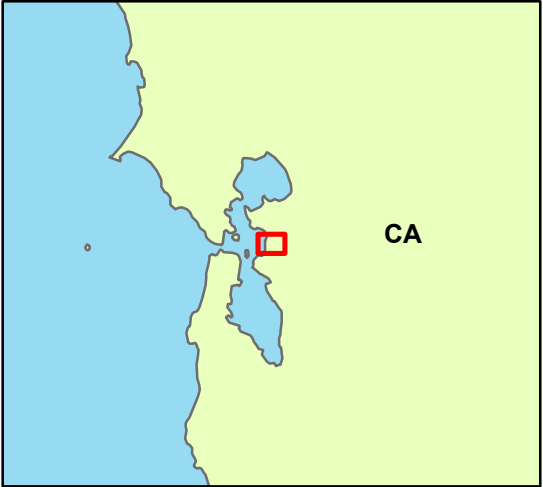


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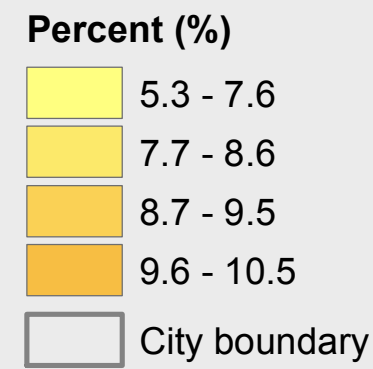
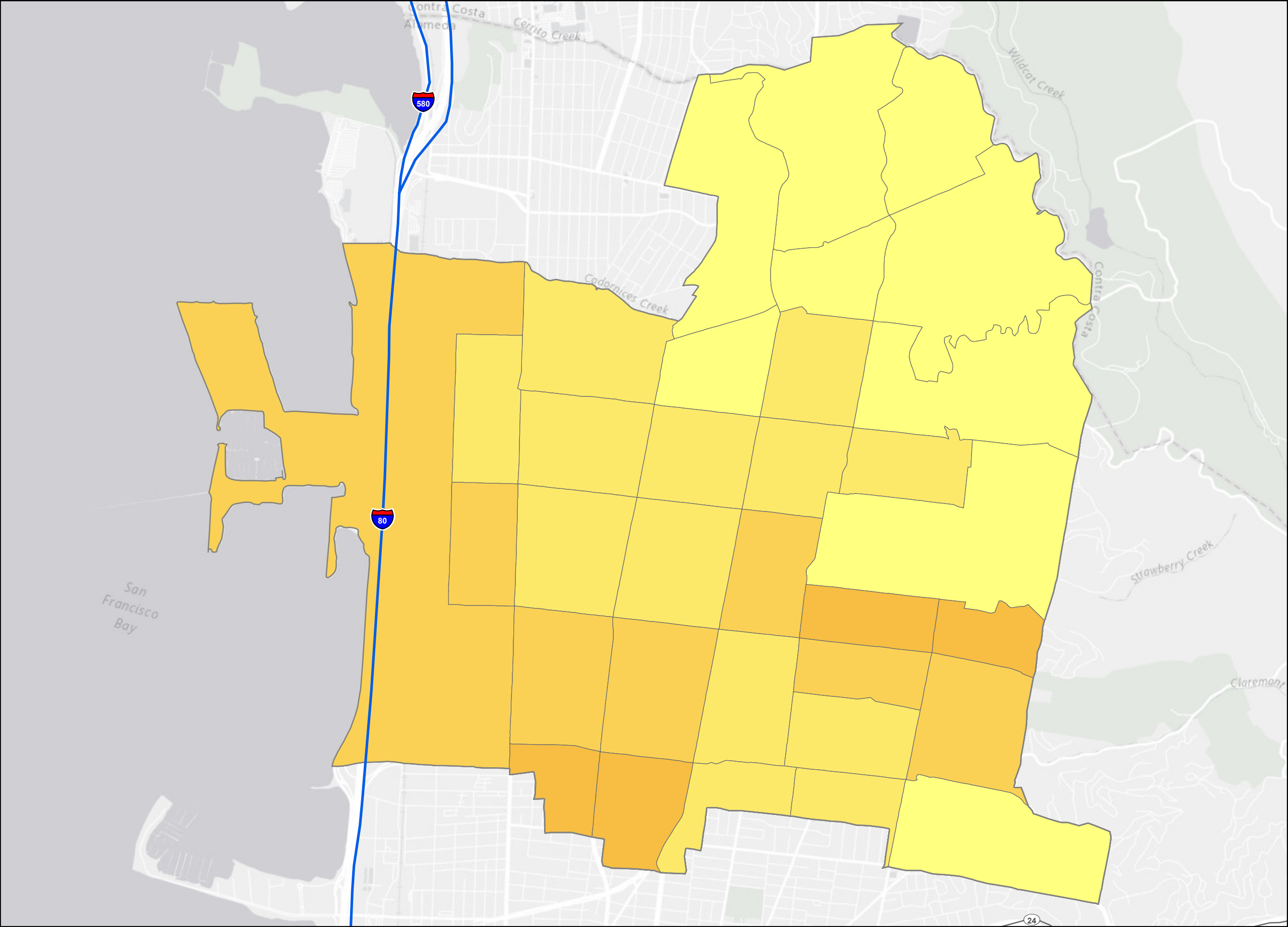
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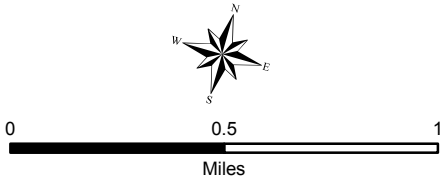


Current asthma prevalence among adults aged ≥18 years by census tract, Berkeley, CA, 2014

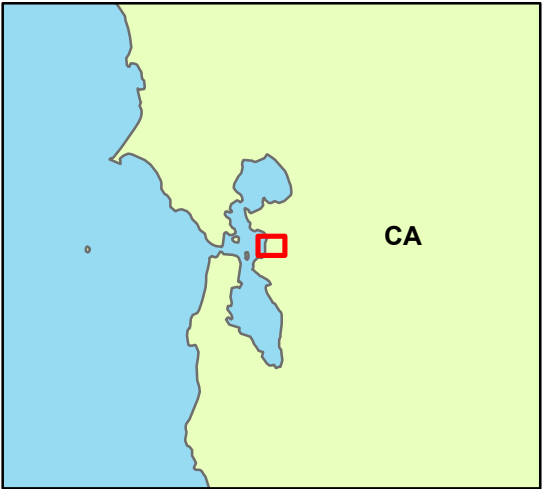


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Use of Preventive Services

